

# **PART B - FEE(S) TRANSMITTAL**

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

WASHINGTON DC OFFICE

**23373**

CUSTOMER NUMBER

SUGHRUE MION, PLLC  
2100 PENNSYLVANIA AVENUE, NW  
SUITE 800  
WASHINGTON, DC 20037

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/788,603	02/21/2001	Elin R. PEDERSEN	CQ10184	4550

TITLE OF INVENTION: A METHOD AND APPARATUS FOR MANAGEMENT AND REPRESENTATION OF DYNAMIC CONTEXT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510.00	\$300.00	\$0.00	\$1,810.00	07/15/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
Ting ZHOU	2173	715-767000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363) <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) ATTACHED. Use of a Customer Number is required.	2. For printing on the patent front page list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1 Sughrue Mion, PLLC 2 3
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**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

FUJI XEROX CO., LTD. Tokyo, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

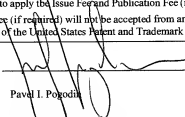
4a. The following fee(s) are submitted: <input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Publication Fee (No small entity discount permitted) <input type="checkbox"/> Advance Order - # of Copies	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) <input type="checkbox"/> A check is enclosed. <input type="checkbox"/> Payment by credit card. Form 1310-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number <u>19-4880</u> . <input checked="" type="checkbox"/> The USPTO is directed and authorized to charge all required fees to Deposit Account No. <u>19-4880</u> . Please also credit any overpayments to said Deposit Account.
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**5. Change in Entity Status (from status indicated above)**

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature		Date	July 8, 2009
Typed or Printed Name	Pavel I. Pogodin	Registration No.	48,205

**"FEE ADDRESS" INDICATION FORM**

Address to:

**MAIL STOP M CORRESPONDENCE**

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Fax to:

571-273-6500

- OR -

**INSTRUCTIONS:** The issue fee must have been paid for application(s) listed on this form. In addition, only an address represented by a Customer Number can be established as the fee address for maintenance fee purposes (hereafter, fee address). A fee address should be established when correspondence related to maintenance fees should be mailed to a different address than the correspondence address for the application.

**When to check the first box below:** If you have a Customer Number to represent the fee address. **When to check the second box below:** If you have no Customer Number representing the desired fee address, in which case a completed Request for Customer Number (PTO/SB/125) must be attached to this form. For more information on Customer Numbers, see the Manual of Patent Examining Procedure (MPEP) §403.

For the following listed application(s), please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with:

☒ Customer Number:

CPA

**00197**

Customer Number

**OR**☐ The attached Request for Customer Number (PTO/SB/125) form

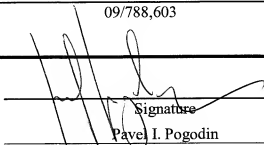
PATENT NUMBER (if known)	APPLICATION NUMBER
	09/788,603

Completed by (check one):

☐ Applicant/Inventor☒ Attorney or Agent of record 48,205

(Reg. No.)

☐ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73 (b) is enclosed.  
(Form PTO/SB/96)

☐ Assignment recorded at Reel \_\_\_\_\_ Frame \_\_\_\_\_

  
Signature

Pavel I. Pogodin

Typed or printed name

(650) 625-8100

Requester's telephone number

July 8, 2009

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 1 forms are submitted.